

## BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING

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P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	A SYSTEM AND A	METHOD FOR BU	JILDING KOUTING TAB	LES AND FOR ROUTING SIGNALS				
Fill in Appropriate			hereto. If not attached her					
Information -	the specification	on was filed on				as		
For Use Without	United States	(if applicable)	نــــــن 1004/00					
Specification Attached:		(if applicable)l and/or						
Attached:	the specification was filed on					and was		
	amended und	(if applicable)						
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.  I do not know and do not believe the same was ever known or used in the United States of America before my or our invention							
1 <u>1 1 1</u> 1 <u>1 1 1</u>	Prior Foreign Ap	plication(s)		Priority Claimed				
Insert Priority	• •	•				_		
Information:						Ü		
(if appropriate)	(Number)	(Country)		(Month/Day/Year Filed)	Yes	No		
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	(Number)	(Country)	· · · · · · · · · · · · · · · · · · ·	(Month/Day/Year Filed)	Yes	No		
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	(Al.,,,,)	<u> </u>		Of and (Day (Very Filed)	Ü.	Ü		
	(Number)	(Country)		(Month/Day/Year Filed)	Yes	No		
j.								
	(Number)	(Country)		(Month/Day/Year Filed)	Yes	No		
	I hereby claim the	benefit under Title	35, United States Code, §1	19(e) of any United States provision	al applications(s) l	isted below.		
Insert Provisional	· · · · · · · · · · · · · · · · · · ·							
Application(s): (if any)	(Application Number) (Filing Date)							
	(Application Number) (Filing Date)							
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:							
•	Country		Application Number	Date of Filing (Mor	nth/Day/Year)			
Insert Requested Information: (if appropriate)								
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
Insert Prior U.S.								
Application(s): (if any)	(Application Num	ber)	(Filing Date)	(Status - patented,	pending, abandon	ed)		
	(Application Num	ber)	(Filing Date)	(Status - patented.	pending, abandon	ed)		



I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart	(Reg. No. 21,066)	Terrell C. Birch	(Reg. No. 19,382)
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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

Full Name of First or Sole Inventor: Insert Name of Inventor Insert Date This Document is Signed

> seit Pöst Office Address

M

Full Name of Third Inventor, if any: see above

Pull Name of Fourth Inventor, if any:

Full Name of Fifth Inventor, if any: ace above I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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\*DATE OF SIGNATURE